

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	SML		5/4/00
O.I.P.E. CLASSIFIER	RSD		2/22/00
FORMALITY REVIEW		7/10/01	3/21/01
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral).... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/14/00
2	✓	✓	7/11/00
3	✓	✓	7/11/00
4	N		
5	N		
6	✓	✓	7/11/00
7	✓	✓	7/11/00
8	✓	✓	7/11/00
9	N		
10	N		
11	✓	✓	7/11/00
12	✓	✓	7/11/00
13	N		
14	N		
15	✓	✓	7/11/00
16	✓	✓	7/11/00
17	✓	✓	7/11/00
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
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